POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ml. C.		7/14/99
O.I.P.E. CLASSIFIER		59	7/9
FORMALITY REVIEW	EW	64934	72799

INDEX OF CLAIMS

✓ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
— (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim (Final / Original)	Date						Claim (Final / Original)	Date						Claim (Final / Original)	Date					
1							51							101						
2							52							102						
3							53							103						
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46							96							146						
47							97							147						
48							98							148						
49							99							149						
50							100							150						

If more than 150 claims or 10 actions
staple additional sheet here

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